
State: District of Columbia **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.012 Multi-Plan 2010
Product Name: Group Medicare Supplement Plans
Project Name/Number: Advertising/FM20-0066

Filing at a Glance

Company: UnitedHealthcare Insurance Company
Product Name: Group Medicare Supplement Plans
State: District of Columbia
TOI: MS08G Group Medicare Supplement - Standard Plans 2010
Sub-TOI: MS08G.012 Multi-Plan 2010
Filing Type: Form
Date Submitted: 02/11/2020
SERFF Tr Num: UHLC-132258186
SERFF Status: Closed-APPROVED
State Tr Num:
State Status:
Co Tr Num: FM20-0066
Implementation: On Approval
Date Requested:
Author(s): Michelle Ambach, Tammy Frederick, Bobbie Walton, Lisa Muhammad
Reviewer(s): RaShaunda Benson (primary), Colin Johnson
Disposition Date: 02/14/2020
Disposition Status: APPROVED
Implementation Date: 02/14/2020

State:	District of Columbia	Filing Company:	UnitedHealthcare Insurance Company
TOI/Sub-TOI:	MS08G Group Medicare Supplement - Standard Plans 2010/MS08G.012 Multi-Plan 2010		
Product Name:	Group Medicare Supplement Plans		
Project Name/Number:	Advertising/FM20-0066		

General Information

Project Name: Advertising	Status of Filing in Domicile: Not Filed
Project Number: FM20-0066	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Large
Group Market Type: Association	Overall Rate Impact:
Filing Status Changed: 02/14/2020	
State Status Changed:	Deemer Date:
Created By: Lisa Muhammad	Submitted By: Lisa Muhammad
Corresponding Filing Tracking Number:	

Filing Description:

Submitted for your review is advertising for use in connection with the AARP group health insurance plans. The enclosed advertising is new and does not replace any previously submitted advertisement. The material included within this filing is an Invitation to Inquire.

Company and Contact

Filing Contact Information

Lisa Muhammad, Compliance Analyst	lisa_j_muhammad@uhc.com
680 Blair Mill Rd	215-902-8465 [Phone]
Horsham, PA 19044	215-902-8813 [FAX]

Filing Company Information

UnitedHealthcare Insurance Company	CoCode: 79413	State of Domicile: Connecticut
185 Asylum Street	Group Code: 707	Company Type: Life and Health
Hartford, CT 06103	Group Name:	State ID Number: 79413
(860) 702-5000 ext. [Phone]	FEIN Number: 36-2739571	

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

SERFF Tracking #:	UHLC-132258186	State Tracking #:		Company Tracking #:	FM20-0066
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
APPROVED	RaShaunda Benson	02/14/2020	02/14/2020

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Disposition

Disposition Date: 02/14/2020
Implementation Date: 02/14/2020
Status: APPROVED

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Statement of Variability	APPROVED	Yes
Form	Closing the Gap Postcard	APPROVED	Yes
Form	Peace of Mind Postcard	APPROVED	Yes
Form	Hassle Free Postcard	APPROVED	Yes

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Form Schedule

Lead Form Number: CA25553ST								
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	APPROVED 02/14/2020	Closing the Gap Postcard	CA25553ST	ADV	Initial		45.000	CA25553ST.pdf
2	APPROVED 02/14/2020	Peace of Mind Postcard	CA25554ST	ADV	Initial		45.000	CA25554ST.pdf
3	APPROVED 02/14/2020	Hassle Free Postcard	CA25555ST	ADV	Initial		45.000	CA25555ST.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NAP	Network Access Plan
NOC	Notice of Coverage	OTH	Other
OUT	Outline of Coverage	PJK	Policy Jacket
POL	Policy/Contract/Fraternal Certificate	POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider
PRC	Provider Contract/Provider Addendum/Provider Leading Agreement	PRD	Provider Directory

Is your Medicare plan too expensive?



You might answer, “Yes!,” especially if you depend on just **Original Medicare**. You could possibly have hundreds of dollars or more in out-of-pocket costs for some of the expenses not paid by Medicare Parts A & B.

Get valuable help in closing this gap in coverage with a Medicare supplement insurance plan. There are plans with predictable low or no co-pays available, so no surprise charges later on, even if your health changes. Plus, you can choose a plan that fits your budget goals, giving you further control over your finances.

Choose the option that’s right for you.

Speak to a [Medicare expert] [licensed insurance agent] today about AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company.

Call UnitedHealthcare: [1-866-864-6359]

Visit: [AARPMedicareSupplement.com]



UnitedHealthcare Insurance Company (UnitedHealthcare)
PO BOX 30607 • Salt Lake City, UT 84130-0607

ELECTRONIC SERVICE REQUESTED

PRSRT STD
U.S. POSTAGE
PAID
UNITEDHEALTHCARE

AARP endorses the AARP Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company. UnitedHealthcare Insurance Company pays royalty fees to AARP for the use of its intellectual property. These fees are used for the general purposes of AARP. AARP and its affiliates are not insurers. AARP does not employ or endorse agents, brokers or producers.

You must be an AARP member to enroll in an AARP Medicare Supplement Plan.

AARP Medicare Supplement Insurance Plans insured by UnitedHealthcare Insurance Company, Horsham, PA. (UnitedHealthcare Insurance Company of New York, Islandia, NY for New York residents). Policy Form No. GRP 79171 GPS-1 (G-36000-4).

In some states, plans may be available to persons under age 65 who are eligible for Medicare by reason of disability or End-Stage Renal Disease.

Not connected with or endorsed by the U.S. Government or the federal Medicare program.

This is a solicitation of insurance. A licensed agent may contact you.

THESE PLANS HAVE ELIGIBILITY REQUIREMENTS, EXCLUSIONS AND LIMITATIONS. FOR COSTS AND COMPLETE DETAILS (INCLUDING OUTLINES OF COVERAGE), CALL A LICENSED INSURANCE AGENT AT THE NUMBER SHOWN.

[Sample A. Sample
1234 Any Street
Any City US 12345-1234]

Peace of mind comes included with Medicare supplement insurance.

When you enroll in Medicare, you don't want the hassle of wondering what your out-of-pocket expenses may be or if your trusted doctor is part of a network. Put those worries behind you with Medicare supplement insurance. Plans with low to no co-pays are available so there are no unwanted surprises later with out-of-pocket expenses.

And with a Medicare supplement insurance plan, you can forget about dealing with networks. You're free to visit any doctors you wish, just as long as they accept Medicare patients.

Only a Medicare supplement insurance plan offers you all of these features.

**Find *your* peace of mind by speaking to a [Medicare expert]
[licensed insurance agent] today about AARP®
Medicare Supplement Insurance Plans, insured by
UnitedHealthcare Insurance Company.**

**Call UnitedHealthcare: [1-866-864-6539]
Visit: [AARPMedicareSupplement.com]**





UnitedHealthcare Insurance Company (UnitedHealthcare)
PO BOX 30607 • Salt Lake City, UT 84130-0607

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[Sample A. Sample
1234 Any Street
Any City US 12345-1234]

Hassle-free Medicare coverage.

With Medicare supplement insurance, the hassle-free features do not change from year to year. You only need to shop once for a plan. Once you're enrolled, that's it.* There are no annual changes to worry about.

- **Guaranteed coverage for life.***
- **No networks, see any doctor who accepts Medicare patients.**
- **No referrals needed.**
- **Plans with low to no co-pays available.**

Enjoy the hassle-free Medicare experience that only a Medicare supplement insurance plan can offer you.

Speak to a [Medicare expert] [licensed insurance agent] today about AARP® Medicare Supplement Insurance Plans, insured by UnitedHealthcare Insurance Company.

**Call UnitedHealthcare: [1-866-865-1474]
or visit: [AARPMedicareSupplement.com]**

*As long as you pay your premiums when due and you do not make any material misrepresentation when you apply for this plan





UnitedHealthcare Insurance Company (UnitedHealthcare)
PO BOX 30607 • Salt Lake City, UT 84130-0607

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[Sample A. Sample
1234 Any Street
Any City US 12345-1234]

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Product Name:	Group Medicare Supplement Plans				
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Supporting Document Schedules

Satisfied - Item:	Statement of Variability
Comments:	
Attachment(s):	SOV828ST.pdf
Item Status:	APPROVED
Status Date:	02/14/2020

UnitedHealthcare Insurance Company

Statement of Variability

Submitted Form Number:

CA25553ST

Variable Text	Explanation of Variability
[Sample A. Sample 1234 Any Street Any City US 12345-1234]	The name and mailing address of the prospective customer will populate here.
[Medicare expert] [licensed insurance agent]	For marketing testing purposes, either one of these titles will be used; however, a title will always appear.
[1-866-864-6359]	The phone number used for this marketing campaign will populate here. The phone number could change for testing purposes; however, a phone number will always appear.
[AARPMedicareSupplement.com]	The website containing information about AARP Medicare Supplement Insurance Plans. The website address may change in the future; however, one will always appear.

Submitted Form Number:

CA25554ST

Variable Text	Explanation of Variability
[Sample A. Sample 1234 Any Street Any City US 12345-1234]	The name and mailing address of the prospective customer will populate here.
[Medicare expert] [licensed insurance agent]	For marketing testing purposes, either one of these titles will be used; however, a title will always appear.
[1-866-864-6539]	The phone number used for this marketing campaign will populate here. The phone number could change for testing purposes; however, a phone number will always appear.
[AARPMedicareSupplement.com]	The website containing information about AARP Medicare Supplement Insurance Plans. The website address may change in the future; however, one will always appear.

UnitedHealthcare Insurance Company

Statement of Variability

Submitted Form Number:

CA25555ST

Variable Text	Explanation of Variability
[Sample A. Sample 1234 Any Street Any City US 12345-1234]	The name and mailing address of the prospective customer will populate here.
[Medicare expert] [licensed insurance agent]	For marketing testing purposes, either one of these titles will be used; however, a title will always appear.
[1-866-865-1474]	The phone number used for this marketing campaign will populate here. The phone number could change for testing purposes; however, a phone number will always appear.
[AARPMedicareSupplement.com]	The website containing information about AARP Medicare Supplement Insurance Plans. The website address may change in the future; however, one will always appear.